

# UTAH PEACE OFFICER STANDARDS AND TRAINING NOTIFICATION OF PERSONNEL STATUS CHANGE

*please print*

From \_\_\_\_\_ Effective Date of Action \_\_\_\_\_  
Name of Agency

Please Be Advised That \_\_\_\_\_ Has  
Name of Officer SSN

## CHECK ONE:

☐ RESIGNED

☐ RETIRED

☐ TERMINATED

☐ TRANSFERRED Name of New Department \_\_\_\_\_

☐ DECEASED

☐ NAME CHANGE From \_\_\_\_\_ To \_\_\_\_\_

☐ PLEASE CHECK THIS BOX  
IF YOU BELIEVE THE CONDUCT RESULTING IN TERMINATION, RESIGNATION OR RETIREMENT, RISES TO THE  
LEVEL OF A CERTIFICATION ACTION BY POST

\_\_\_\_\_  
SIGNATURE OF AGENCY REPRESENTATIVE

\_\_\_\_\_  
DATE

\*THIS FORM SATISFIES THE REQUIREMENTS IMPOSED ON CHIEFS, SHERIFFS AND OTHER ADMINISTRATORS OF LAW  
ENFORCEMENT AGENCIES OUTLINED IN 53-6-209 AND 53-6-211